

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		10-27-99
O.I.P.E. CLASSIFIER			11-1-99
FORMALITY REVIEW	Ann	59229 S9229	11/9/99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Dated
1	(1)	✓	10/6/2000
2	✓	✓	3/21/00
3	✓	✓	7/27/00
4	✓	✓	7/27/00
5	✓	✓	7/27/00
6	✓	✓	7/27/00
7	✓	✓	7/27/00
8	✓	✓	7/27/00
9	✓	✓	7/27/00
10	✓	✓	7/27/00
11	✓	✓	7/27/00
12	✓	✓	7/27/00
13	✓	✓	7/27/00
14	✓	✓	7/27/00
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16	✓	✓	7/27/00
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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